

CLAIMS ONLY							Application Number 10783603		Filing Date	
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
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Total Indep	1		1		1		1		1	
Total Depend	5		5		5		5		5	
Total Claims	6		6		6		6		6	